

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09/622089	FILING DATE				
							APPLICANT(S)					
6-21-06 CLAIMS							6/21/06					
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	
1	1		1									
2		1		1								
3		2		2								
4		2		2								
5		2		2								
6		2		2								
7		1		1								
8		1		1								
9		1		1								
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11		1		1								
12		1		1								
13		1		1								
14		1		1								
15						2						
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18						1						
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100												
TOTAL IND.	1		1					3				
TOTAL DEP.		17		17					17			
TOTAL CLAIMS	18		18					20				

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS